

## PART B - FEE(S) TRANSMITTAL

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Mail Stop ISSUE FEE  
 Commissioner for Patents  
 P.O. Box 1450  
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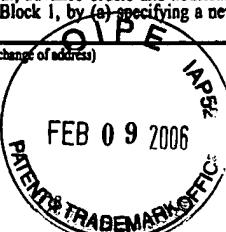
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590 11/18/2005

R. Neil Sudol  
 714 Colorado Avenue  
 Bridgeport, CT 06605-1601

02/10/2006 MWOLGE2 00000040 10687401

01 FC:2501 700.00 OP  
 02 FC:1504 300.00 OP

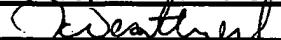


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### Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Joseph Weathered (Depositor's name)



February 7, 2006 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/687,401	10/16/2003	Naomi L. Nakao	G30-011	8611

TITLE OF INVENTION: ENDOSCOPE HAVING MULTIPLE WORKING SEGMENTS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	02/21/2006
EXAMINER	ART UNIT		CLASS-SUBCLASS		
FLANAGAN, BEVERLY MEINDL	3739		600-153000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 R. Neil Sudol

2 Henry D. Coleman

3 William J. Sapone

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Granit Medical Innovation, LLC

New York, NY

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are enclosed:

Issue Fee  
 Publication Fee (No small entity discount permitted)  
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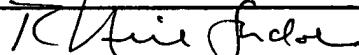
A check in the amount of the fee(s) is enclosed.  
 Payment by credit card. Form PTO-2038 is attached.  
 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 04-0838 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature



Date February 7, 2006

Typed or printed name

R. Neil Sudol

Registration No. 31,669

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